

HoA and Contact Information Form: Complete Both 1 & 2

1. Homeowners Association Certification

>	This notification confirms that no Homeowi rental property permit.	ners Asso	ciation exists g	overning the property	applying for a sh	ort term
	Signature:					
	Printed Name:					
	Date:					
	<u>OR</u>					
>	This notification confirms that operating a S Association Agreement or Bylaws, Condomi agreement governing and limiting the use of	nium Agr	eement, Cover	ants, Codes and Rest	•	
	Signature:					
	Printed Name:					
	Date:					
	2. Owner Contact Information:					
Na	Name:		_			
Address:		City:		Zip:	State:	-
Phone:		Email:				-
Re	Responsible Party (if different than owner cont	act):				
Na	Name:		_			
Address:		City:		Zip:	State:	-
Ph	Phone:	Email:				